

**BAKER BOTTS LLP**

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
A36156-PCT-USA-A 072667

In re Application of Dumas	
Application Number 10/797,248	Filed March 10, 2004
For USE OF KETOL-ACID	
Group Art Unit 1614	Examiner tba

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |  |          |
|--|----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 420   |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$ _____ |

- Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-4377. I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor

- assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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August 11, 2004

Date

PTO Reg No.: 41,328

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*Carmella L. Stephens*

Signature

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Carmella L. Stephens

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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 Total of \_\_\_\_\_ forms are submitted.